

APPLICATION DATA SHEET**Application Information**

Application Number::	National Stage of PCT/SE2004/000818
Filing Date::	November 29, 2005
Application Type::	Regular
Subject Matter::	National Stage Application
Suggested Classification::	None
Suggested Group Art Unit::	None
CD-ROM or CD-R?::	No
Number of CD Disks::	0
Number of Copies of CDs::	None
Sequence Submission?::	No
Computer Readable Form (CFR)?::	No
Number of Copies of CFR::	None
Title::	IMPLANT DEVICE
Attorney Docket Number::	43318-225722
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	THREE
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	None
Licensed US Govt. Agency::	
Contract or Grant Numbers::	None
Secrecy Order in Parent Appl.::	

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship::	Swedish
Country::	Sweden
Status::	Full Capacity
Given Name::	Dan
Middle Name::	
Family Name::	PITULIA
Name Suffix::	
City of Residence::	VÄSTRA FRÖLUNDA
State or Province of Residence::	
Country of Residence::	Sweden
Street of Mailing Address::	Käringbergsg. 8
City of Mailing Address::	VÄSTRA FRÖLUNDA
State or Province of Mailing Address::	
Country of Mailing Address::	Sweden
Postal or Zip Code of Mailing Address::	S-426 76

Correspondence Information

Correspondence Customer Number::	26694
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Representative Information

Representative Customer Number::	26694
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Domestic Priority Information

Application::	Continuity Type::	Application::	Filing Date::
	Continuation of		
	Continuation of		

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	0301588-0	May 30, 2003	YES

Assignee Information

Assignee Name:: ENTIFIC MEDICAL SYSTEMS AB
Street of Mailing Address:: Box 16024
City of Mailing Address:: GÖTEBORG
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: S-412 21